U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

DECLARATION FOR UTILITY OR		03 K01/102				
DESIGN	First Named Inventor	Massingill, et al.				
PATENT APPLICATION	CC	MPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	not yet assigned				
Declaration Submitted OR Declaration Submitted after Initial	Filing Date .	filed herewith				
With Initial Filing (surcharge	Art Unit	not yet assigned				
Filing (37 CFR 1.16 (e)) required)	Examiner Name	" "				
I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
SCALABLE FISH REARING RACEWAY SYSTEM						
(Title of the Invention)						
the specification of which	,					
is attached hereto		1				
OR						
was filed on (MM/DD/YYYY)	as United States Ar	pplication Number or PCT International				
Application Number and was amend	ed on (MM/DD/YYYY)	(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is mat continuation-in-part applications, material information which be and the national or PCT international filing date of the continual	ecame available betweer tion-in-part application.	the filing date of the prior application				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) o	f any foreign application(s) for patent,				

inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop Yes	y Attached? No
	·	•			
		•			
Additional foreign applicat	ion numbers ar	e listed on a supplemental pr	inrity data sheet PTO/SE	2/02B attached	harata

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	X Customer Num	ber: 2	2890	OR _	Corresp	oondence address below
Name			-		•	
Address						
City			State			ZIP
Country		phone		Fax	•	•
I hereby declare that all staten and belief are believed to be statements and the like so ma- false statements may jeopardiz	e true; and further th de are punishable by	at these stat	ements vonment, o	vere made with r both, under 18	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:	Ap	etition has	s been filed for t	nis unsian	ned inventor
Given Name (first and middle [if any])	Michael	,		Family Name or Surname		ssingill
Inventor's Signature Mich	houl]. //	Passis	rgill			Date Nov. 11, 2003
Residence: City	State (Country		Citizer	nship .
San Diego	CA			US	<u> </u>	US
Mailing Address 13483 Black Hill	ls Road					
City	State		ZI			Country
San Diego	CA			92129	0	US
NAME OF SECOND INVENTO	R:			A petition has be	en filed fo	or this unsigned inventor
Given Name (first and middle [if any])	_	•		Family Name or Surname	•	•
<u> </u>	Rodney J	•		or Surname		mberlain
Inventor's Signature	- 2 P	hans				Date 11 - 12 - 03
Residence: City	State		Country		Citizen	
Indio	C	A		US		US
Mailing Address 80736 Willow Lane						
City	State	-	ZIF)	Countr	у
Indio	C	A		92201		US
X Additional inventors or a legal re	presentative are being name	d on the 1 s	upplemental	sheet(s) PTO/SB/02	A or 02LR a	attached hereto.

PTO/SB/02A (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

ADDITIONAL INVENTOR(S)

DECLARATION		Supplemental	ineet	Page -	of
Name of Additional Joint Inventor, if any:		A petition	has been filed for this	unsigned inv	ventor
Given Name (first and middle (if any)	$\overline{}$	Family Name or	Surname		
James M. /	1 //	Carlbe			١
Inventor's Signature Auro Can	te	m		Date ///	11/03
Residence: City San Diego	State	CA Cou	ıntry US	Citizenship	US
Mailing Address 825 Avalon COurt					
Mailing Address		•			
City San Diego	State	CA	zip 92109	Country	US
Name of Additional Joint Inventor, if any:		☐ A petition	has been filed for this	unsigned inv	entor
Given Name (first and middle (if any)		٠.	Family Name or	Sumame	
Jon C.		Van Ols	st		,
Inventor's Signature Son C. Van Olst		Date ///	114/03		
Residence: City Bonsall	State	CA	Country U	S	Citizenship US
Mailing Address 6424 Lago Grande	e Dr	ive			,
Mailing Address			•		
City Bonsall	State	CA	Zip 92003	Country	US
Name of Additional Joint Inventor, if any:		A petition	has been filed for this	unsigned inv	entor entor
Given Name (first and middle (if any)			Family Name or S	Surname	
Inventor's Signature		Date			
Residence: City	State		Country		Citizenship
Mailing Address					
Mailing Address					
City	State		Zip	Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 11/30/2005, OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

red to respond to a collection of info	mation unless it displays a valid OMB control number.
Application Number	not yet assigned
Filing Date	filed herewith
First Named Inventor	Massingill, et al.
Title	SCALABLE FISH
Art Unit	not yet assigned
Examiner Name	11 11
Attorney Docket Number	03-KST/102

I hereby appoint:				
X Practitioners at Customer	Number: 22890			
OR				
Practitioner(s) named belo	ow:			·
	Name		Registration	Number
				
*			 	

as my/our attorney(s) or agent(s Trademark Office connected the) to prosecute the application identi	fied above, and to tra	ansact all business	s in the United States Patent and
	correspondence address for the ab	ove-identified applic	ation to:	
The above-mentioned	Customer Number:			
OR				
The address associate	ed with Customer Number:	. 9		
***************************************			- X-	
OR			* .	
OR Firm or			* .	·
OR			* .	
OR Firm or Individual Name	:	11	* .	
OR Firm or Individual Name Address		State	* -	Zip
OR Firm or Individual Name Address Address City Country			* -	Zip
Firm or Individual Name Address Address City Country Telephone		State	* .	Zip
Firm or Individual Name Address Address City Country Telephone I am the:			* -	Zip
Firm or Individual Name Address Address City Country Telephone I am the:		Fax	* .	Zip
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the	he entire interest. See 37 CFR 3.71 FR 3.73(b) is enclosed. (Form PTO)	Fax	* -	Zip
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the	he entire interest. See 37 CFR 3.71	Fax (SB/96)	f Record	Zip
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the	he entire interest. See 37 CFR 3.71 FR 3.73(b) is enclosed. (Form PTO) SIGNATURE of Appl	Fax (SB/96)	f Record	Zip
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the Statement under 37 CF	he entire interest. See 37 CFR 3.71 FR 3.73(b) is enclosed. (Form PTO) SIGNATURE of Appl	Fax (SB/96)		
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the Statement under 37 CF	he entire interest. See 37 CFR 3.71 FR 3.73(b) is enclosed. (Form PTO) SIGNATURE of Appl el J. Massingill	Fax (SB/96)	f Record Telephone	Zip 858-452-5765
Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the Statement under 37 CF	he entire interest. See 37 CFR 3.71 FR 3.73(b) is enclosed. (Form PTO) SIGNATURE of Appl el J. Massingill Color of the entire interest.	Fax (SB/96) icant or Assignee of	Telephone	858-452-5765

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 11/30/2005, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	not yet assigned
Filing Date	filed herewith
First Named Inventor	Massingill, et al
Title	SCALABLE FISH
Art Unit	not yet assigned
Examiner Name	11 11
Attorney Docket Number	03-KST/102

I hereby ap	ppoint:				
	ctitioners at Customer	Number: 22890			
OR					,
Prac	ctitioner(s) named belo	ow:			
	•	Name		Registration Number	7
					┥╶│
<u> </u>					-
	 -				-
			 		-
as my/our	attomev(s) or agent(s	to prosecute the application identified	above and to trans	act all business in the United States Patent a	ind
	Office connected the				
	ognize or change the	correspondence address for the above	-identified applicatio	on to:	
⊤ لعدا	he above-mentioned	Customer Number:			
OR					
ו עו	The address associate	ed with Customer Number:			
OR					
	Firm or Individual Name				
Add					
Add	ress				
City			State	Zip	
Cou					
	phone		Fax	· · · · · · · · · · · · · · · · · · ·	
I am the:		•			
التحا ٨	pplicant/Inventor.			•	
		he entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/	96)		
		SIGNATURE of Applican	nt or Assignee of R	Record	
Name	Rodn	ey J. Chamberlain			
Signature	-60r	m. B. Class			
Date	11-12.	-032	•	Telephone 858-452-5765	
NOTE: Signation forms if more	atures of all the inventors a than one signature is re	s or assignees of record of the entire interest equired, see below.	or their representative	(s) are required. Submit multiple	•
X ·Tot	al off	forms are submitted.			

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

	mation unless it displays a valid OMB control number.
Application Number	not yet assigned
Filing Date	filed herewith
First Named Inventor	Massingill, et al.
Title	SCALABLE FISH
Art Unit	not yet assigned
Examiner Name	11 11
Attorney Docket Number	03-KST/102

I hereby appoint:			ł
X Practitioners at Custom	ner Number: 22890		
OR	L		
Practitioner(s) named t	pelow:		
	Name		Registration Number
			
as my/our attorney(s) or agen Trademark Office connected	t(s) to prosecute the application identified a therewith.	bove, and to transac	et all business in the United States Patent and
Please recognize or change t	he correspondence address for the above-io	dentified application	to:
	ed Customer Number:		
OR			
The address associ	ated with Customer Number:	•	
OR	. L		
Firm or Individual Name			
Address	<u> </u>		
Address	•		
City		State	Zip
Country			
Telephone		Fax	
I am the:			· ·
Applicant/Inventor.			
	of the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/90	6)	
	SIGNATURE of Applicant	or Assignee of Rec	ord
NameTame		,,, , , , , , , , , , , , , , , , , , 	
	es M. Carpherg	/	
Signature	es M. Cärlibers	tim	
	s M. Carlhers Auun // all Nov. // 2003	tim	Telephone 858-452-5765
Signature Date	MoV- // 2003 tors or assignees of record of the entire interest or		

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are requi

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of info	mation unless it displays a valid OMB control number.
	not yet assigned
Filing Date	filed herewith
First Named Inventor	Massingill, et al.
Title	SCALABLE FISH
Art Unit	not yet assigned
Examiner Name	11 11
Attorney Docket Number	03-KST/102

I hereby appoint:					
X Practitioners at Customer Number:	22890				
OR			_		
Practitioner(s) named below:	•				
. Name			Registration N	lumber	
			,,,,		
					
· · ·		1 .			
as my/our attomey(s) or agent(s) to prosecu Trademark Office connected therewith.	te the application identified a	bove, and to transa	act all business in	n the United States Patent and	
Please recognize or change the corresponde	ence address for the above-ion	dentified applicatio	in to:		
The above-mentioned Customer N	umber:				
OR	•	<u> </u>			
The address associated with Custo	omer Number:		•		
OR		i.			
Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country	•	I con I			
Telephone		Fax			
Applicant/Inventor.				!	
Assignee of record of the entire inte	erest. See 37 CFR 3 71				
Statement under 37 CFR 3.73(b) is	enclosed. (Form PTO/SB/96	6)			
	SIGNATURE of Applicant	or Assignee of R	ecord		
Name Jon C. Van Ol	st				
Signature Con C. Var	lst		T =		
Date 01/14/83		•	Telephone	858-452-5765	
NOTE: Signatures of all the inventors or assignees forms if more than one signature is required, see b	of record of the entire interest or elow*.	r their representative((s) are required. Su	bmit multiple	
*Total of 4 forms are su	bmitted.			0	

This collection of Information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.